

# UTVDRS Through the Years

Cristy Sneddon, RHIT  
Data Abstraction Coordinator  
and  
Teresa Betzer, BS, SSW  
Project Coordinator

# Objectives

- NVDRS Overview
- Utah's History
- Timeline (Achievements)

# NVDRS Overview

- In 1999, six private foundations pooled their funds to demonstrate the importance and feasibility of data collection about violent deaths given adequate funding
- Supported the National Violent Injury Statistics System (NVISS)
  - Administered by the Harvard Injury Control Research Center and included 12 participating universities, health departments and medical centers
    - Intermountain Injury Control Research Center (IICRC)



# NVDRS Overview

- Examples of violent death are:
  - Homicides, including legal intervention
  - Suicides
  - Undetermined deaths
  - Accidental firearm deaths

# NVDRS Overview

- In 2000, dozens of medical associations, suicide prevention organizations, child protection advocates, and family violence prevention organizations joined a coalition to secure federal funding
- Congress approved \$1.5 million to start
- In 2002, first cooperative agreements were made with six states:
  - Maryland, Massachusetts, New Jersey, Oregon, South Carolina and Virginia

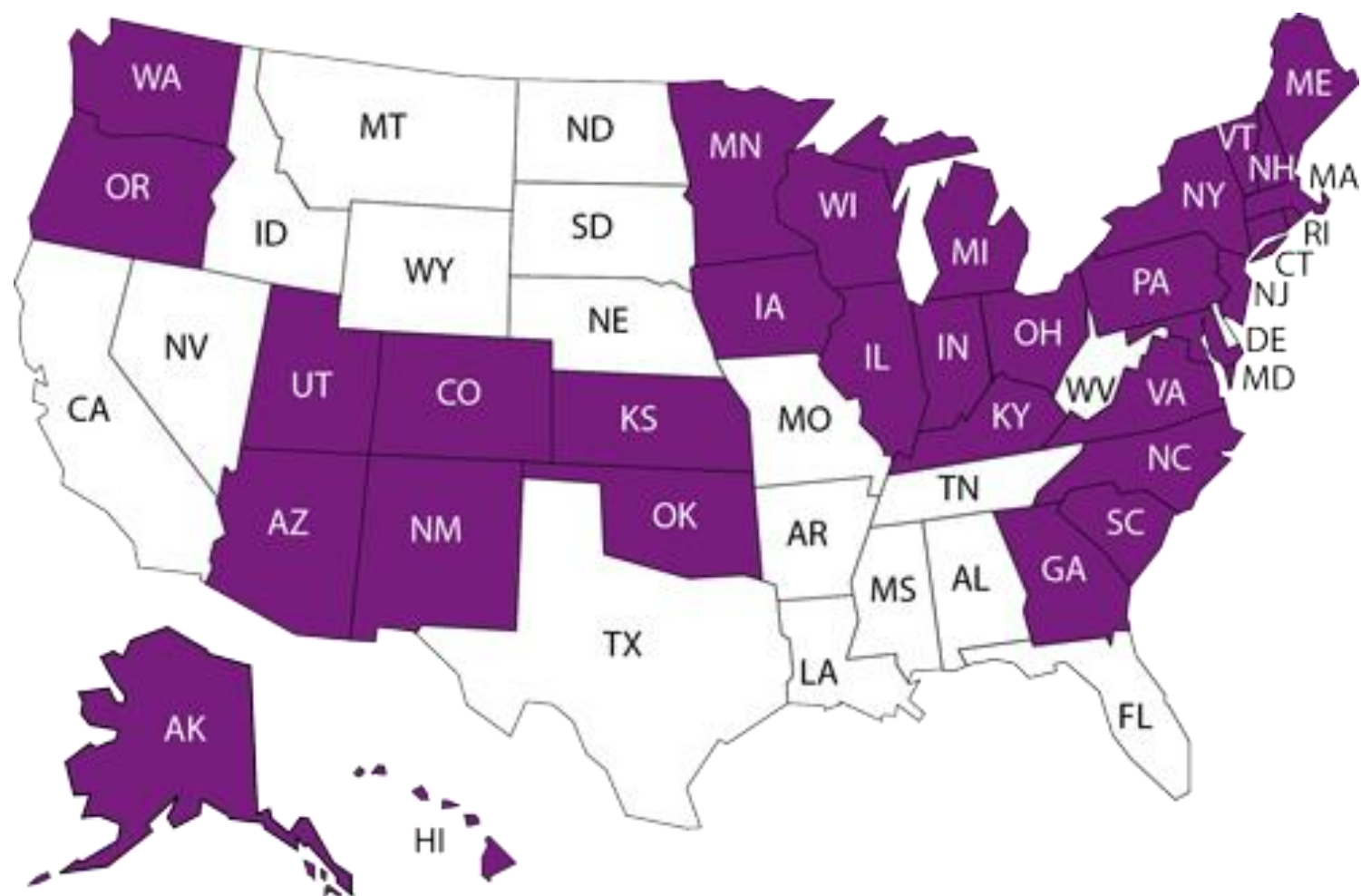
# NVDRS Interesting Factoid

- Only state-based surveillance (reporting) system that pools data on violent deaths from multiple sources into a usable, anonymous database
  - Medical Examiner/Coroner
  - Law Enforcement
  - Vital Statistics
  - Crime Lab
  - Supplemental Homicide Reports (BCI)

# NVDRS Overview

- Population-based surveillance system
- Provides states and communities with a clearer understanding of violent deaths
- Gathers related circumstances such as:
  - Depression or major life stresses
  - Relationship or financial problems
  - Other crimes (i.e. robbery, assault)
- Currently funding 32 states
  - Expand to all 50 states, the District of Columbia (DC) and U.S. territories







# Utah's History

- Applied for and received funding in 2004
  - One of 17 states at that time
- Collaborated with IICRC to develop and implement the program at UDOH
- Continued to contract with IICRC for data storage and technical assistance
- Began data collection in 2005

# Utah's History

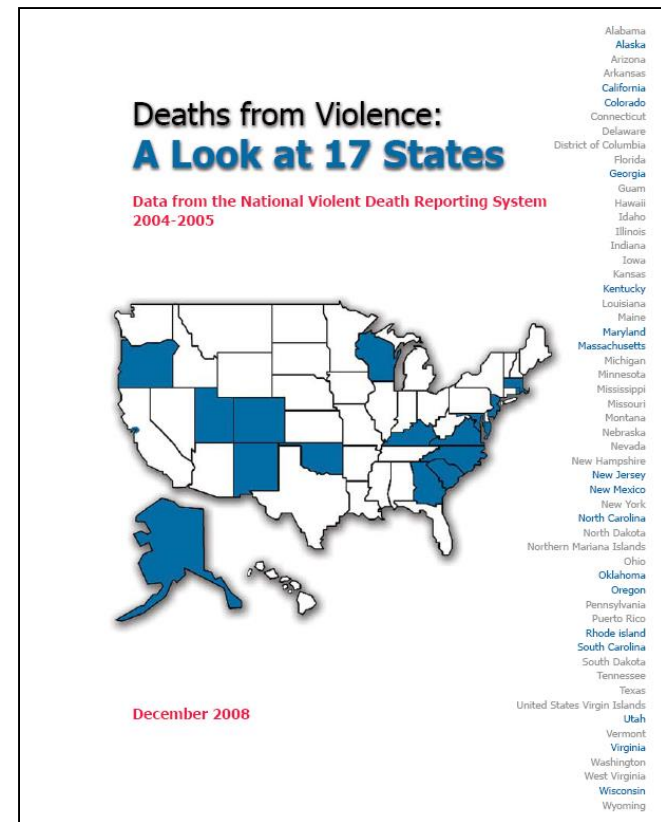
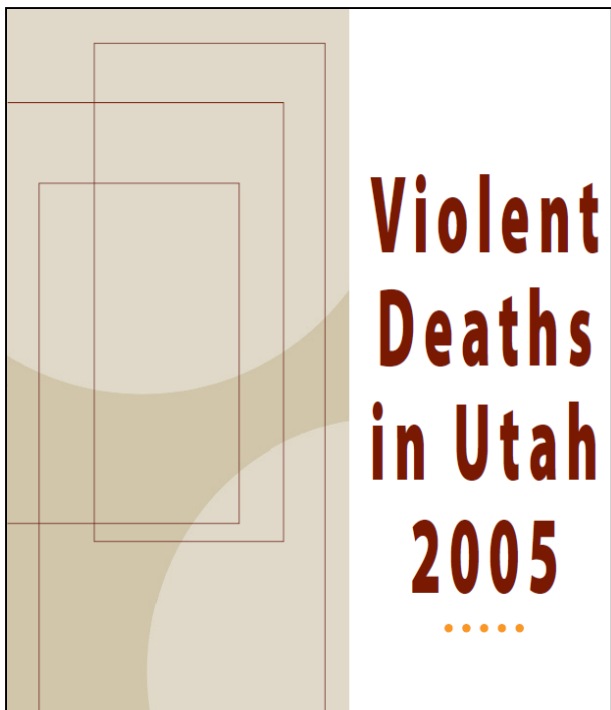
- Active system with 'real-time' data collection with approximately 850 violent deaths per year
  - Primary sources (VR and ME) entered within 6 months of the date of death
  - LE sources entered within 18 months of the death
- Data collection done manually and entered into the software
  - After case initiation, VR data able to be imported but had to be verified

# Utah's History

- Program was loaded onto computers and laptops
- Data housed in a secure location at IICRC and “pushed” to CDC every night
- All abstractions done manually
  - Medical Examiner cases
  - Police records requested and received
    - Began building relationships for ‘on-site’ access to records with several agencies

# Utah's VDR Program

- In 2008, published our first report
- Collaborated with the other NVDRS states in a joint report





# Utah's VDR Program

- In 2010, UTVDRS won the “Excellence in Collecting the Most Timely and Complete Violent Death Data” recognition for data year 2007
- In October of 2010 the International Association of Chiefs of Police declared support for the National Violent Death Reporting System

# Utah's VDR Program

- In 2011, UTVDRS partnered with the Accidental Drug Overdose program to collect data on Accidental Overdose
  - Backtracked and gathered data from 2005 and forward
  - Entire overdose picture
- Won the “Excellence in Collecting the Most Timely and Complete Violent Death Data” recognition for data years 2008 and 2009

# Utah's VDR Program

- In 2012, received the Safe States Alliance “Innovative Initiative of the Year” award for Drug Overdose Reporting System
  - First NVDRS state to attempt this type of data collection
- Helped support the development of the online Utah Medical Examiner Database (UMED)
  - Allowed secure, online access to some data variables prior to on-site visits at the ME office

# Utah's VDR Program

- Won the “Excellence in Collecting the Most Timely and Complete Violent data” recognition for data years 2010 and 2012
  - Minor glitch in 2011





# Web-Based System

- In 2013, CDC was able to transition NVDRS to a web-based system
  - Volunteered and selected to participate in the system development and pilot
- Data entered directly into CDC secure servers
  - Completely de-identified data
  - No extra expense of storing data locally
- Streamlined reporting variables
  - Decreased the amount of duplication

# Web-Based System

- More circumstance variables
  - Able to get a better picture of the incident
- Expanded toxicology
  - More detailed, able to identify as a weapon
- Challenges
  - Internet connections unreliable at times
  - Not able to work 'off-line' like the old system

# Successes and Challenges

- State-wide Medical Examiner System
  - Central location
  - Strong working relationship
  - In the process of upgrading the UMED system which will give us access to more data electronically
  - Challenges
    - Cases ‘pending’ for extended periods of time

# Successes and Challenges

- Law Enforcement
  - Ability to work on-site with access to records electronically and on paper with 5 agencies
    - Typically have high numbers of cases to review
  - Central point of contact for consistency
  - Subpoena capability
  - Challenges
    - No centralized system (over 140 agencies statewide)
    - Staff turnover (start over)
    - Getting agencies we don't contact often to respond
    - Redacted/incomplete information



# Successes and Challenges

- Supplemental Homicide Reports (SHR)
  - Receive spreadsheet yearly
  - Challenges
    - Not all agencies submit SHR information to the Bureau of Criminal Investigation (BCI)
- Crime Lab
  - Central office
  - Challenges
    - Limited data available for firearms
    - Analysis for items that will have an impact on a case (none done for suicide, unless suspicious)

# Moving Forward...

- Continue to build and maintain relationships with critical partners without whom data collection would not be possible
  - Medical Examiner
  - Vital Records
  - Law Enforcement Agencies

# Moving Forward...

- Recommendations from TAC on new ways to continue to release and use data for prevention